

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U S C 439 or 440




READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <input type="text"/> 25842	2 Fiscal Year Covered From <input type="text"/> / <input type="text"/> / <input type="text"/> Through <input type="text"/> / <input type="text"/> / <input type="text"/> 1 / 1 / 2005 Through 12 / 31 / 2005
3 Name and address of person filing Name <input type="text"/> <input type="text"/> <input type="text"/> John J Pylilo P O Box Bldg Room No if any <input type="text"/> Street <input type="text"/> 526 Saw Mill River Road City <input type="text"/> Millwood State <input type="text"/> ZIP Code + 4 <input type="text"/> New York 10546	4 Name file number and address of labor organization Name <input type="text"/> Operative Plasterers' & Cement Masons' I U Labor Organization File Number <input type="text"/> 000132 P O Box Building and Room Number if any <input type="text"/> Street <input type="text"/> 14405 Laurel Place Suite 300 City <input type="text"/> Laurel State <input type="text"/> ZIP Code + 4 <input type="text"/> Maryland 20707
5 Position in labor organization <input type="text"/> International Representative	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name <input type="text"/> Trade Name if any <input type="text"/> P O Box Bldg Room No if any <input type="text"/> Street <input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code + 4 <input type="text"/>	7 a Nature of Interest, Transaction or Income <input type="text"/> 7 b Amount <input type="text"/>

Signature

15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete. (See the section on penalties in the instructions.)		
Signed 	On <input type="text"/> 05/31/2006 Date	<input type="text"/> 718-547 5440 Telephone Number

Name of Person Filing John Pylilo	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any) Name <input type="text"/> Trade Name if any <input type="text"/> P O Box Bldg Room No if any <input type="text"/> Street <input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code + 4 <input type="text"/>	9 Business deals with <input type="checkbox"/> a Labor Organization <input type="checkbox"/> b Trust <input type="checkbox"/> c Employer
10 If 9 b or 9 c is checked give trust or employer's name Name <input type="text"/> Trade Name if any <input type="text"/> P O Box Bldg Room No if any <input type="text"/> Street <input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code + 4 <input type="text"/>	11 a Nature of such dealing <input type="text"/> 11 b Approximate dollar value of such dealing <input type="text"/> 12 a Nature of interest held or income received <input type="text"/> 12 b Amount <input type="text"/>

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name The Cement League Trade Name if any <input type="text"/> P O Box Bldg Room No if any 9th Floor Street 49 West 45th Street City New York State New York ZIP Code + 4 10016	14 a Nature of payment Construction Industry Council of westchester and Hudson Valley 27th Annual Golf & Tennis Classic on July 11 2005 at Sleepy Hollow Country Club Tarrytown New York
13 b Is the Business an Employer <input type="checkbox"/> or Consultant <input checked="" type="checkbox"/> ?	14 b Amount of payment <input type="text"/> \$495